

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Florida Congressional Committee

ADDRESS (number and street) 5821 Hollywood Blvd
Suite 200
 Check if different than previously reported. (ACC)
Hollywood FL 33021

2. **FEC IDENTIFICATION NUMBER** C00127811
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2010 through 09 30 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Stephen Fiske

Signature of Treasurer Electronically Filed by Stephen Fiske Date 10 15 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Florida Congressional Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		90831.55
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	96626.49									
(c) Total Receipts (from Line 19)	18596.24	88556.84								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	115222.73	179388.39								
7. Total Disbursements (from Line 31)	45014.25	109179.91								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	70208.48	70208.48								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Florida Congressional Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	16900.00	76320.00
(ii) Unitemized	100.00	500.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	17000.00	76820.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	17000.00	76820.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	1500.00	11500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	96.24	236.84
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	18596.24	88556.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	18596.24	88556.84

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	764.25	2429.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	764.25	2429.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	44250.00	106750.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	45014.25	109179.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	45014.25	109179.91

DETAILED SUMMARY PAGE
of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	17000.00	76820.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17000.00	76820.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	764.25	2429.91
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	764.25	2429.91

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 17
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Florida Congressional Committee

A.

Full Name (Last, First, Middle Initial)
Amy Dean

Mailing Address 2600 Island Blvd #1706

City State Zip Code
Aventura FL 33160

FEC ID number of contributing federal political committee. **C**

Name of Employer Amy Dean Occupation mediator/arbitrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 05 / 2010

Transaction ID: SA11AI.5117

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Jerome Falic

Mailing Address 6100 Hollywood Blvd

City State Zip Code
Hollywood FL 33024

FEC ID number of contributing federal political committee. **C**

Name of Employer Duty Free Americas, Inc. Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 03 / 2010

Transaction ID: SA11AI.5123

Amount of Each Receipt this Period
4000.00

C.

Full Name (Last, First, Middle Initial)
Leon Falic

Mailing Address 6100 Hollywood Blvd

City State Zip Code
Hollywood FL 33024

FEC ID number of contributing federal political committee. **C**

Name of Employer Duty Free Americas, Inc. Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 03 / 2010

Transaction ID: SA11AI.5125

Amount of Each Receipt this Period
4000.00

SUBTOTAL of Receipts This Page (optional) ► 9000.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Florida Congressional Committee

A.	Full Name (Last, First, Middle Initial) Morris Futernick		Date of Receipt MM / DD / YYYY 09 / 01 / 2010		
	Mailing Address 2 Grove Isle Dr Apt. B-1509		Transaction ID: SA11AI.5132		
	City Miami	State FL	Zip Code 33133-4119	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer N/A	Occupation Retired			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00			

B.	Full Name (Last, First, Middle Initial) Marc Hurwitz		Date of Receipt MM / DD / YYYY 07 / 26 / 2010		
	Mailing Address 100 Lincoln Rd Apt 1142		Transaction ID: SA11AI.5119		
	City Miami Beach	State FL	Zip Code 33139	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-employed	Occupation Investor			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00			

C.	Full Name (Last, First, Middle Initial) Michael S. Jaffee		Date of Receipt MM / DD / YYYY 08 / 02 / 2010		
	Mailing Address 9720 Stirling Rd Ste 212		Transaction ID: SA11AI.5121		
	City Hollywood	State FL	Zip Code 33024	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-employed	Occupation Accountant			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Florida Congressional Committee

A.	Full Name (Last, First, Middle Initial) Eric Kane	Date of Receipt MM / DD / YYYY 08 / 03 / 2010
	Mailing Address 19900 East Country Club Dr #709	Transaction ID: SA11AI.5126
	City State Zip Code Aventura FL 33180	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Self-employed	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Ador Lazar	Date of Receipt MM / DD / YYYY 09 / 01 / 2010
	Mailing Address 18901 NE 29th Ave Ste. 103	Transaction ID: SA11AI.5131
	City State Zip Code Aventura FL 33180	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Lifespring Financial, Inc.	Occupation Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

C.	Full Name (Last, First, Middle Initial) Gerald Schwartz	Date of Receipt MM / DD / YYYY 09 / 03 / 2010
	Mailing Address 21150 Point Pl Apt 406	Transaction ID: SA11AI.5129
	City State Zip Code Aventura FL 33180	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	3650.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 9 / 17	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Congressional Committee

A.	Full Name (Last, First, Middle Initial) Jorge Woldenberg		Date of Receipt																					
	Mailing Address 276 Bal Cross Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	6		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	8		1	6		2	0	1	0														
	City	State	Zip Code		Transaction ID: SA11AI.5130																			
	Bal Harbour	FL	33154																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
Name of Employer Corpac Steel Products Cor- p.		Occupation President		<input type="text" value="2500.00"/>																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		<input type="text" value="2500.00"/>																				

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="16900.00"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Florida Congressional Committee

A. Full Name (Last, First, Middle Initial)
DAVID VITTER FOR US SENATE

Mailing Address PO BOX 8175

City State Zip Code
METAIRIE LA 70011

FEC ID number of contributing federal political committee. **C** C00394593

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 27 / 2010

Transaction ID: SA16.5225

Amount of Each Receipt this Period
1000.00

Campaign Contribution Refund

B. Full Name (Last, First, Middle Initial)
KANSANS FOR TIAHRT

Mailing Address 2250 N ROCK ROAD SUITE 118A

City State Zip Code
WICHITA KS 67226

FEC ID number of contributing federal political committee. **C** C00459198

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 16 / 2010

Transaction ID: SA16.5226

Amount of Each Receipt this Period
500.00

Campaign Contribution Refund

SUBTOTAL of Receipts This Page (optional) ► 1500.00

TOTAL This Period (last page this line number only) ► 1500.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 17
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Congressional Committee

A.

Full Name (Last, First, Middle Initial) Wachovia Bank		Date of Receipt MM / DD / YYYY 08 / 31 / 2010
Mailing Address Hollywood Blvd		Transaction ID: SA17.5205
City Hollywood	State FL	Zip Code 33021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.71
Name of Employer	Occupation	Interest earned
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 206.50	

B.

Full Name (Last, First, Middle Initial) Wachovia Bank		Date of Receipt MM / DD / YYYY 09 / 30 / 2010
Mailing Address Hollywood Blvd		Transaction ID: SA17.5206
City Hollywood	State FL	Zip Code 33021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.34
Name of Employer	Occupation	Interest earned
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.84	

SUBTOTAL of Receipts This Page (optional)	▶	66.05
TOTAL This Period (last page this line number only)	▶	66.05

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Florida Congressional Committee

<p>A. Full Name (Last, First, Middle Initial) Holly Brent</p> <p>Mailing Address 5821 Hollywood Blvd Ste 200</p> <p>City Hollywood State FL Zip Code 33021</p> <p>Purpose of Disbursement Accounting Services Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.5136 Date of Disbursement 07 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Category/Type: 001</p>
<p>B. Full Name (Last, First, Middle Initial) MTG Web</p> <p>Mailing Address 3810 Legner Street</p> <p>City Plano State IL Zip Code 60545</p> <p>Purpose of Disbursement Web Hosting Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.5149 Date of Disbursement 08 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 359.40</p> <p>Category/Type: 001</p>
<p>C. Full Name (Last, First, Middle Initial) PayPal</p> <p>Mailing Address paypal.com</p> <p>City San Jose State CA Zip Code 95113</p> <p>Purpose of Disbursement Transaction Fees Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.5199 Date of Disbursement 08 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 7.55</p> <p>Category/Type: 001</p>

SUBTOTAL of Disbursements This Page (optional) ▶

616.95

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 17

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)
Florida Congressional Committee

A.

Full Name (Last, First, Middle Initial)

PayPal

Mailing Address paypal.com

City San Jose State CA Zip Code 95113

Purpose of Disbursement
Transaction Fees

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5201

Date of Disbursement

08 / 03 / 2010

Amount of Each Disbursement this Period

29.30

SUBTOTAL of Disbursements This Page (optional)

29.30

TOTAL This Period (last page this line number only)

646.25

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Florida Congressional Committee

<p>A. Full Name (Last, First, Middle Initial) DAN COATS FOR INDIANA</p> <p>Mailing Address PO BOX 301141</p> <p>City INDIANAPOLIS State IN Zip Code 46230</p> <p>Purpose of Disbursement Campaign Contribution</p> <p>Candidate Name DANIEL R COATS</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5156 Date of Disbursement 08 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) DAVID VITTER FOR US SENATE</p> <p>Mailing Address PO BOX 8175</p> <p>City METAIRIE State LA Zip Code 70011</p> <p>Purpose of Disbursement Campaign Contribution</p> <p>Candidate Name DAVID VITTER</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5172 Date of Disbursement 09 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) ELLSWORTH FOR INDIANA</p> <p>Mailing Address P.O. Box 62</p> <p>City Evansville State IN Zip Code 47701</p> <p>Purpose of Disbursement Campaign Contribution</p> <p>Candidate Name BRAD ELLSWORTH</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 08</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5138 Date of Disbursement 07 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

11000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Florida Congressional Committee

A.

Full Name (Last, First, Middle Initial)
FRIENDS OF RICH NUGENT

Mailing Address PO BOX 15668

City State Zip Code
BROOKSVILLE FL 34304

Purpose of Disbursement
Campaign Contribution

Candidate Name
NUGENT, RICHARD B

Office Sought: House
 Senate
 President
State: FL District: 05

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5144
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
FRIENDS OF SCHUMER

Mailing Address 509 MADISON AVE SUITE 1902

City State Zip Code
NEW YORK NY 10022

Purpose of Disbursement
Campaign Contribution

Candidate Name
SCHUMER, CHARLES E

Office Sought: House
 Senate
 President
State: NY District: 00

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5173
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
GREGG HARPER FOR CONGRESS

Mailing Address POST OFFICE BOX 54344

City State Zip Code
PEARL MS 39288

Purpose of Disbursement
Campaign Contribution

Candidate Name
GREGG HARPER

Office Sought: House
 Senate
 President
State: MS District: 03

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5133
Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Florida Congressional Committee

A. Full Name (Last, First, Middle Initial) KLEIN FOR CONGRESS Mailing Address 21301 POWERLINE ROAD SUITE 204 City BOCA RATON State FL Zip Code 33433 Purpose of Disbursement Campaign Contribution Candidate Name RON KLEIN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5171 Date of Disbursement 08 / 31 / 2010
	Amount of Each Disbursement this Period 1000.00
B. Full Name (Last, First, Middle Initial) ROS-LEHTINEN FOR CONGRESS Mailing Address P O Box 52-2784 City MIAMI State FL Zip Code 33152 Purpose of Disbursement Campaign Contribution Candidate Name ILEANA ROS-LEHTINEN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5184 Date of Disbursement 09 / 27 / 2010
	Amount of Each Disbursement this Period 2500.00
C. Full Name (Last, First, Middle Initial) RUDY MOISE FOR CONGRESS Mailing Address PO BOX 680417 City NORTH MIAMI State FL Zip Code 33168 Purpose of Disbursement Candidate Name MOISE, RUDOLPH Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 17 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5150 Date of Disbursement 08 / 23 / 2010
	Amount of Each Disbursement this Period 250.00

SUBTOTAL of Disbursements This Page (optional) ▶

3750.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Florida Congressional Committee

A. Full Name (Last, First, Middle Initial)
TED DEUTCH FOR CONGRESS COMMITTEE

Mailing Address 20423 SR 7 Suite F6-383

City State Zip Code
Boca Raton FL 33498

Purpose of Disbursement
Campaign Contribution

Candidate Name
THEODORE ELIOT DEUTCH

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: FL District: 19

Transaction ID: SB23.5168

Date of Disbursement

08 / 31 / 2010

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
TOOMEY FOR SENATE COMMITTEE

Mailing Address 2720 JORDAN ROAD

City State Zip Code
OREFIELD PA 18069

Purpose of Disbursement
Campaign Contribution

Candidate Name
PATRICK JOSEPH TOOMEY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: PA District: 00

Transaction ID: SB23.5196

Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

TOTAL This Period (last page this line number only) ▶

29250.00